



Atty. Dkt. No. 081356-0158

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kazuma TOMIZUKA et al.
Title: METHOD FOR MODIFYING
CHROMOSOMES
Appl. No.: 09/763,362
Filing Date: 04/23/2001
Examiner: Thaian N. Ton
Art Unit: 1632

CERTIFICATE OF EXPRESS MAILING
I hereby certify that this correspondence is being deposited with the
United States Postal Service's "Express Mail Post Office To
Addressee" service under 37 C.F.R. § 1.10 on the date indicated
below and is addressed to: Commissioner for Patents, P.O. Box
1450, Alexandria, VA 22313-1450.

EV 423498899 US APRIL 29, 2005
(Express Mail Label Number) (Date of Deposit)

Charles J. Schreck
(Printed Name)

Charles J. Schreck
(Signature)

AMENDMENT TRANSMITTAL

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.
Additionally, Applicants are also enclosing a Supplemental Information Disclosure Statement
with a corresponding Form SB/08.

[X] The fee required for additional claims is calculated below:

	Claims As Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
Total Claims:	89	- 111	= 0	x \$50.00	= \$0.00
Independent Claims:	7	- 12	= 0	x \$200.00	= \$0.00
First presentation of any Multiple Dependent Claims:			+	\$360.00	= \$0.00
CLAIMS FEE TOTAL					= \$0.00

- ☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/> Extension for response filed within the first month:	\$120.00	\$0.00
<input checked="" type="checkbox"/> Extension for response filed within the second month:	\$450.00	\$450.00
<input type="checkbox"/> Extension for response filed within the third month:	\$1,020.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,590.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,160.00	\$0.00
EXTENSION FEE TOTAL:		\$450.00
<input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$450.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):		\$0.00
TOTAL FEE:		\$450.00

- ☐ Please charge Deposit Account No. 19-0741 in the amount of \$450.00. A duplicate copy of this transmittal is enclosed.
- ☒ A check in the amount of \$450.00 is enclosed for the filing a two-month extension of time.
- ☒ A check in the amount of \$180.00 is enclosed for the Supplemental Information Disclosure Statement.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

April 29, 2005

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By

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